NOTICE: This exceed 100,00 penalty shall n	h dav that such	n violation per				2137-0629 ON DATE: 10/31/2021						
A							nitial Date submitted:		01/22/207	19		
U.S Department of Transportation Pipeline and Hazardous Materials Safety Administration							orm Type:		INITIAL			
					s	Date submitted:						
				T FOR								
	CALENDAR YEAR 2018											
GAS DISTRIBUTION SYSTEM A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0629. Public reporting for this collection of information is estimated to be approximately 16 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.											MB Control uding the on are	
<i>Important:</i> Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at http://www.phmsa.dot.gov/pipeline/library/forms .												
PART A - OI	PERATOR	INFORMATI	ON			(DOT	use only) 20199101-37095					
1. Name of	Operator						NEPHI CITY					
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY BE OBTAINED)												
2	a. Street A	ddress				56 NORTH 100 EAST						
2	b. City and	County				NEPHI						
2	c. State					UT						
2	d. Zip Cod	e				84648						
3. OPERAT	FOR'S 5 DI	GIT IDENTIF	ICATION NU	JMBER		30510						
4. HEADQU	JARTERS	NAME & AD	DRESS									
4	a. Street A	ddress				21 EAST 100	NORTH					
4	b. City and	County					NEPHI					
	c. State					UT						
	ld. Zip Cod					84648						
5. STATE I	N WHICH S	SYSTEM OP	ERATES				UT					
6. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GROUP (Select Commodity Group based on the predominant gas carried and complete the report for that Commodity Group. File a separate report for each Commodity Group included in this OPID.)												
Natural Gas												
7. THIS REPORT PERTAINS TO THE FOLLOWING TYPE OF OPERATOR (Select Type of Operator based on the structure of the company included in this OPID for which this report is being submitted.):												
Municipal Owned												
PART B - SYSTEM DESCRIPTION												
1.GENERAL												
STEEL CATHODICALLY CA										RECONDITION		
	UNPROTECTED PROTECTED PLAS			PLASTIC	WROUGH		COPPER	OTHER	ED CAST IRON	SYSTEM TOTAL		
MILES OF	BARE	COATED	BARE	COATED								
MAIN NO. OF	0	0	0	37	82.1	0	0	0	0		119.1	
SERVICES	0	0	0	0	2386	0	0	0	0		2386	

Z.WILES OF MAINS	IN SYSTEM AT EN	D OF YEAR									
MATERIAL	UNKNOWN	2" OR LES	S	OVER 2" THRU 4"	OVER 4" THRU 8"		OVER 8" THRU 12"	OVER 12		SYSTEM TOTALS	
STEEL 0		0		0	37		0	0		37	
DUCTILE IRON 0		0		0	0		0	0	0		
COPPER	0	0		0	0		0	0		0	
CAST/WROUGHT IRON	0	0		0	0		0	0		0	
PLASTIC PVC 0		0		0	0		0	0		0	
PLASTIC PE	0	73.6		8.5	0		0	0		82.1	
PLASTIC ABS	0	0		0	0		0	0		0	
PLASTIC OTHER	0	0		0	0		0	0		0	
OTHER	0	0		0	0		0	0		0	
RECONDITIONED CAST IRON	0	0		0	0		0	0		0	
TOTAL	0	73.6		8.5	37		0	0 0		119.1	
Describe Other N	laterial:		1		1				1		
3.NUMBER OF SER	VICES IN SYSTEM	AT END OF YEA	R			AVE	RAGE SERVICE L	ENGTH: 118			
MATERIAL	UNKNOWN	1" OR LES		OVER 1" THRU 2"	OVER 2 THRU 4		OVER 4" THRU 8"	OVER 8		SYSTEM TOTALS	
STEEL	0	0		0	0		0	0		0	
DUCTILE IRON	0	0		0	0		0	0		0	
COPPER	0	0		0	0		0	0		0	
CAST/WROUGHT IRON	0	0		0	0		0	0		0	
PLASTIC PVC	0	0		0	0		0	0		0	
PLASTIC PE	0	2356		30	0		0	0		2386	
PLASTIC ABS	0	0		0	0		0	0		0	
PLASTIC OTHER	0	0		0			0	0		0	
OTHER	0	0		0	0		0	0		0	
RECONDITIONED CAST IRON	0	0 0		0			0	0		0	
TOTAL	0	2356		30	0		0	0		2386	
	laterial:		I		1	I			I		
Describe Other N											
Describe Other M 4.MILES OF MAIN A	AND NUMBER OF SI	ERVICES BY DE	CADE OF IN	STALLATION							

								1					
MILES OF MAIN	0	0	0	0	0	0	0	106.0	10.2	2.9	119.1		
NUMBER OF SERVICES	0	0	0	0	0	0	0	1554	505	327	2386		
PART C - TO	OTAL LEAKS	AND HAZ	ARDOUS LE	EAKS ELIMIN	ATED/REP	AIRED DURIN	NG THE YEA	AR					
					MAINS			SERVICES					
CAUSE OF LEAK			TOTAL			IAZARDOUS		TOTAL		HAZARDOUS			
CORROSION FAILURE													
NATUR	AL FORCE D	AMAGE											
EXCA		IAGE	3			3		6		6			
OTHER OUTSIDE FORCE DAMAGE													
PIPE, WEI	_D OR JOINT	FAILURE	1										
EQU	IPMENT FAIL	URE											
INCOR	RECT OPERA	TIONS											
OTHER CAUSE													
NUMBER O	NUMBER OF KNOWN SYSTEM LEAKS AT END OF YEAR SCHEDULED FOR REPAIR : 0												
PART D - EX	CAVATION	DAMAGE				PART E - EXCESS FLOW VALUE (EFV) AND SERVICE VALVE DATA							
	JMBER OF E SE: <u>9</u>		N DAMAGE	S BY APPAR	ENT	Total Number Of Services with EFV Installed During Year: 50							
a. One-Call	Notification P	ractices No	t Sufficient:	0		Estimated Number Of Services with EFV In the System At End Of Year: 408							
 b. Locating Practices Not Sufficient: 0 c. Excavation Practices Not Sufficient: 9 						* Total Number of Manual Service Line Shut-off Valves Installed During Year: $\underline{0}$							
d. Other:						* Estimated Number of Services with Manual Service Line Shut-off Valves Installed in the System at End of Year: $\underline{0}$							
						*These questions only pertain to reporting years 2017 & beyond.							
2. NUMBER	OF EXCAVA	TION TICKE	ETS : 209	07									
PART F - LE	AKS ON FEE		ID			PART G-PERCENT OF UNACCOUNTED FOR GAS							
	IBER OF LEA D TO REPAIR		DERAL LANI	D REPAIRED	OR	UNACCOUNTED FOR GAS AS A PERCENT OF TOTAL CONSUMPTION FOR THE 12 MONTHS ENDING JUNE 30 OF THE REPORTING YEAR.							
				[(PURCHASED GAS + PRODUCED GAS) MINUS (CUSTOMER USE + COMPANY USE + APPROPRIATE ADJUSTMENTS)] DIVIDED BY (CUSTOMER USE + COMPANY USE + APPROPRIATE ADJUSTMENTS) TIMES 100 EQUALS PERCENT UNACCOUNTED FOR.									
						FOR YEAR ENDING 6/30: <u>3.35%</u>							
PART H - AI		NFORMATI	ON										

PART I - PREPARER									
Drew Mcpherson,operator (Preparer's Name and Title)	(435) 623-4914 (Area Code and Telephone Number)								
dmcpherson@nepi.utah.gov (Preparer's email address)	(435) 623-4916 (Area Code and Facsimile Number)								